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PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number

First Named Inventor

Norman James Moore

**COMPLETE IF KNOWN**

Application Number

09 / 397,110

Filing Date

Sept. 16, 1999

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original first and sole inventor (if only one is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PROCESS AND MATERIALS FOR THE RAPID DETECTION OF STREPTOCOCCUS PNEUMONIAE EMPLOYING PURIFIED ANTIGEN-SPECIFIC ANTIBODIES

the specification of which

(Title of the Invention)

☐ is attached hereto  
OR

☒ was filed on (MM/DD/YYYY) 09/16/1999 as United States Application Number or PCT International

Application Number 09/397,110 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s) Filing Date (MM/DD/YYYY)

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[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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## DECLARATION — Utility or Design Patent Application

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
09/156,486	09/18/1998	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number  OR

☒ Registered practitioner(s) name/registration number listed below

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Number Bar Code  
Label here

Name	Registration Number	Name	Registration Number
Mary Helen Sears	19,961		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number  or Bar Code Label

OR ☒ Correspondence address below

Name	The M.H. Sears Law Firm Chartered				
Address	910 Seventeenth Street, N.W.				
Address	Suite 800				
City	Washington	State	DC	ZIP	20006
Country	U.S.A.	Telephone	(202) 463-3892	Fax	(202) 463-4852

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])		Family Name or Surname					
Norman James		Moore					
Inventor's Signature	<i>Norman James Moore</i>		Date	11/16/98			
Residence : City	North Berwick	State	Maine	Country	U.S.A.	Citizenship	U.S.
Post Office Address	10-1 Nowell Street						
Post Office Address							
City	North Berwick	State	Maine	ZIP	03906	Country	U.S.A.

☒ Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>	<b>Attorney Docket Number</b>	
	<b>2nd. Named Inventor</b>	Mary Kathleen Fent
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	09 / 397,110
	<b>Filing Date</b>	Sept. 16, 1999
	<b>Group Art Unit</b>	
<input type="checkbox"/> Declaration Submitted with Initial Filing	<b>OR</b>	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
<b>Examiner Name</b>		

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				YES	NO
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
09/156,486	09/18/1998	

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As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number
Mary Helen Sears	19,961		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Dir ct all correspondence to: ☐ Customer Number or Bar Code Label ☒ Correspondence address below

Name	The M.H. Sears Law Firm Chartered				
Address	910 Seventeenth Street, N.W.				
Address	Suite 800				
City	Washington	State	DC	ZIP	20006
Country	U.S.A.	Telephone	(202) 463-3892	Fax	(202) 463-4852

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Second Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname
Mary Kathleen	Fent

Inventor's Signature	<i>Mary Kathleen Fent</i>	Date	16 Nov 99
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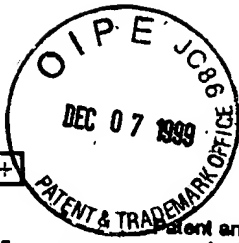
Residence: City	Cumberland Center	State	Maine	Country	U.S.A.	Citizenship	U.S.
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P st Offic Address	32 Farwell Avenue		
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Post Office Address			
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City	Cumberland Center	State	Maine	ZIP	04021	Country	U.S.A.
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☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>	<b>Attorney Docket Number</b>			
	<b>3rd Named Inventor</b>	Vladimir Andrei Koulchin		
	<b>COMPLETE IF KNOWN</b>			
	<b>Application Number</b>	09/397,110		
	<b>Filing Date</b>	Sept. 16, 1999		
	<b>Group Art Unit</b>			
<input type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	<b>Examiner Name</b>	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the sole inventor (or one of the joint inventors) of an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PROCESS AND MATERIALS FOR THE RAPID DETECTION OF STREPTOCOCCUS PNEUMONIAE EMPLOYING PURIFIED ANTIGEN-SPECIFIC ANTIBODIES

the specification of which

(Title of the Invention)

☐ is attached hereto  
OR

☒ was filed on (MM/DD/YYYY)

09/16/1999

as United States Application Number or PCT International

Application Number

09/397,110

and was amended on (MM/DD/YYYY)

(if applicable).

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I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
09/156,486	09/18/1998	

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As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☐ Customer Number  OR ☒ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number
Mary Helen Sears	19,961		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

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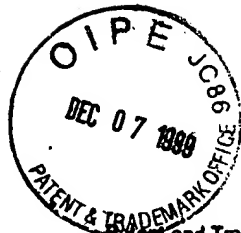
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Address	910 Seventeenth Street, N.W.				
Address	Suite 800				
City	Washington	State	DC	ZIP	20006
Country	U.S.A.	Telephone	(202) 463-3892	Fax	(202) 463-4852

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Name of THIRD Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname	
Vladimir Andrei		Koulchin	
Inventor's Signature	<i>V. Koulchin</i>		Date 11/15/98
Residence: City	Portland	State	Maine
		Country	U.S.A.
Post Office Address	340 Eastern Prom., #224		
City	Portland	State	Maine
		ZIP	04101
		Country	U.S.A.

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



Please type a plus sign (+) inside this box → ☐

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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>	Attorney Docket Number			
	4th Named Inventor	Elena Valentin Molokova		
	<b>COMPLETE IF KNOWN</b>			
	Application Number	09/397,110		
	Filing Date	Sept. 16, 1999		
	Group Art Unit			
<input type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name	

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Name of 4th Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Elena Valentin	Molokova

Inventor's Signature	<i>Molokova</i>				Date	11/15/99	
Residence: City	Portland	State	Maine	Country	U.S.A.	Citizenship	Russia
Post Office Address	340 Eastern Prom., #224						
Post Office Address							
City	Portland	State	Maine	ZIP	04101	Country	U.S.A.

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